

HOME Program - Homebuyer/Homeowner Rehabilitation Completion Report

		Mark Appropriate Box <input type="checkbox"/> Original Submission <input type="checkbox"/> Revision	
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Part A: Activity Information

1. Activity Number:	2. Name of Participant:	3. Participant Tax ID Number:	4. CHDO Tax ID Number
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5. Type of Property (check one):

(1) ☐ 1-4 Single Family (2) ☐ Condominium (3) ☐ Cooperative (4) ☐ Manufactured House

Part B: Financial Structure of Activity

Type of Activity Financed (check one):

(1) ☐ Rehabilitation Only (3) ☐ Acquisition Only (5) ☐ Acquisition & New Construction
 (2) ☐ New Construction Only (4) ☐ Acquisition & Rehabilitation

Activity Costs

1. HOME Funds <small>(Complete appropriate items (1) – (5))</small>	(1) Direct Loan	Annual Interest Rate	%	Amortization Period	YRS	\$
	(2) Grant					\$
	(3) Deferred Payment Loan	Annual Interest Rate	%	Amortization Period	YRS	\$
	(4) Community Housing Development Organization (CHDO) Loan					
	a. TA Loan				\$	
	b. Seed Loan				\$	
	Total CHDO Loan (Total items 4a & 4b)					\$
	Total HOME Funds (Total items (1) – (5))					\$
2. Public Funds	(1) Other Federal Funds				\$	
	(2) State/Local Appropriated Funds				\$	
	(3) State/Local Tax Exempt Bond Proceeds				\$	
	Total Public Funds (Total items (1) – (3))					\$
3. Private Funds	(1) Private Loan Funds	Annual Interest Rate	%	Amortization Period	Yrs	\$
	(2) Owner Cash Contribution				\$	
	(3) Private Grants				\$	
	Total Private Funds (Total items (1) – (3))					\$
4. HOME Program Income						\$
5. Total Activity Costs (Total items 1 – 4)						\$

Part C: Financial Assistance to Homebuyer**COMPLETE FOR HOMEBUYER ACTIVITIES ONLY**

1. Initial Purchase Price				\$
2. Appraised Value				\$
3. Total HOME Funds for Downpayment Assistance (sum of 3(a) + 3(c) + 3(d))				\$
(a) Direct Loan	Annual Interest Rate %	Amortization Period Yrs.	\$	
(b) Grant			\$	
(c) Deferred Payment Loan			\$	
(d) Other			\$	
4. HOME Program Income for Downpayment Assistance				\$
5. Total HOME Funds for Downpayment Assistance (Items 3-4)				\$

Part D: Complete for homeowner rehabilitation activities only.

1. After Rehabilitation Value	\$
2. Single Family Mortgage Limit	\$

Part E: Household Characteristics. Complete the first line for the unit to be occupied by an owner. Fill out the second (thir/fourth line(s) for the rental units, if any. For an unoccupied unit, enter unit number, number of bedrooms, and 9 for occupancy.

Activity Address:	Activity Number:
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Unit #	# of Bedrooms	Occupancy	Tenant Contribution	Subsidy Amount	Total Rent	% of Area Median	Hispanic	Race-Head of Household	Size of Household	Head of Household	Rental Assistance

No. of Bedrooms Code

0 = SRO
1 = 1 Bedroom
2 = 2 Bedrooms
3 = 3 Bedrooms
4 = 4 Bedrooms

% of Area Median Code

1 = 0-30%
2 = 30 – 50%
3 = 50 – 60%
4 = 60 – 80%

Race of Head of Household Code

11 = White
12 = Black/African American
13 = Asian
14 = American Indian/Alaskan Native
15 = Native Hawaiian/Other Pacific Islander
16 = American Indian/Alaska Native & White
17 = Asian & White
18 = Black/African American & White
19 = American Indian/Alaska Native & Black/African American
20 = Other Multi Racial

Head of Household Code

1 = Single/Non-Elderly
2 = Elderly
3 = Related/Single Parent
4 = Related/Parent
5 = Other

Occupancy Code

1 = Tenant
2 = Owner
3 = Vacant

Hispanic

Y = Yes
N = No

Rental Assistance Code

1 = Section 8
2 = HOME TBRA
3 = Other
4 – No Assistance